Case 20-10145-amc Doc 12 Filed 02/20/20 Entered 02/20/20 13:01:32 Desc Main

		[Document	t Page 1 of 21		
Fill in this info	rmation to identify your	case and this	filing:			
Debtor 1	Tara L. Snyder					
Dahtar 0	First Name	Middle Na	me	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Na	me	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DIS	STRICT OF PI	ENNSYLVANIA		
						_
Case number	20-10145					Check if this is an amended filing
						Ŭ
Official F	orm 106A/B					
_	le A/B: Prop	ertv				12/15
nink it fits best. nformation. If mo nswer every qu	Be as complete and accur ore space is needed, attach estion.	ate as possible. It n a separate shee	f two married p t to this form. C	e. If an asset fits in more than one eople are filing together, both are on the top of any additional pages ou Own or Have an Interest In	equally responsible for su	upplying correct
☐ No. Go to P Yes. Where	art 2.					
	rfield Drive s, if available, or other description		Single-fa Duplex o	operty? Check all that apply unily home or multi-unit building inium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
			☐ Manufac	tured or mobile home	Current value of the	Current value of the
Reading	PA 19	609-0000	Land		entire property?	portion you own?
City	State	ZIP Code	☐ Timeshai	erest in the property? Check one		\$130,000.00 your ownership interest nancy by the entireties, or
Berks			Debtor 2	•	<u> </u>	
County				and Debtor 2 only	Check if this is con (see instructions)	nmunity property
				ion you wish to add about this iter	n, such as local	
			Debtor purc	chased property in 2011 for	r \$130,000.00	
				lue has decreased with the ue is about the same as w needs.		sibly less due to
2. Add the do	ollar value of the portion	ı you own for a	II of your entr	ries from Part 1, including any	entries for	6400.000.00
						\$130,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 20-10145-amc Doc 12 Filed 02/20/20 Entered 02/20/20 13:01:32 Desc Main Document Page 2 of 21

Deb	otor 1 Tara L. Snyder		Case number (if known)	20-10145
3. C	cars, vans, trucks, tractors, sport utility	vehicles, motorcycles		
_	l No			
	Yes			
0.4	I. Malia.	What has an interest in the manual 2 or	Do not deduct sec	eured claims or exemptions. Put
3.1	· · · · · · · · · · · · · · · · · · ·	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Debtor 1 only		ve Claims Secured by Property.
	Year: Approximate mileage:	Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
	Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
	no vehicle in Debtor's name,	At least one of the deptors and another		
	debtor's car was repossessed, so she uses her husband's car to get around.	☐ Check if this is community property (see instructions)	\$C	0.00 \$0.00
	No I Yes	watercraft, fishing vessels, snowmobiles, motorcy		
5 A	Add the dollar value of the portion you on pages you have attached for Part 2. Writ	own for all of your entries from Part 2, including that number here	g any entries for =>	\$0.00
Part	13: Describe Your Personal and Household	Items		
Do	you own or have any legal or equitable			Current value of the portion you own? Do not deduct secured claims or exemptions.
<u> </u>	lousehold goods and furnishings Examples: Major appliances, furniture, line ☐ No ☐ Yes. Describe	ns, china, kitchenware		
	household go	ods		\$1,500.00
	Electronics Examples: Televisions and radios; audio, v including cell phones, cameras, No Yes. Describe	ideo, stereo, and digital equipment; computers, p media players, games	rinters, scanners; music c	ollections; electronic devices
	electronics			\$500.00
I	Examples: Antiques and figurines; painting other collections, memorabilia,	s, prints, or other artwork; books, pictures, or othe collectibles	er art objects; stamp, coin	or baseball card collections;
	☐ Yes. Describe			
I.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, musical instruments No	and other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;
	☐ Yes. Describe			

Official Form 106A/B Schedule A/B: Property page 2

Case 20-10145-amc Doc 12 Filed 02/20/20 Entered 02/20/20 13:01:32 Page 3 of 21 Document Case number (if known) 20-10145 Debtor 1 Tara L. Snyder 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,200.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$5.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking account with Mid Penn Bank \$200.00 Checking \$5.00 17.2. Savings Savings account with Mid Penn Bank

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

☐ Yes...... Institution or issuer name:

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D	ebtor 1	Tara L. Snyd	er		Case number (if known)	20-10145
19.	joint	ublicly traded stoventure	ock and interests in incorp	porated and unincorporated busines	ses, including an interest i	n an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific info	ormation about them Name of entity:		% of ownership:	
20.	Nego	tiable instruments	include personal checks, ca	gotiable and non-negotiable instrume ashiers' checks, promissory notes, and ransfer to someone by signing or delive	money orders.	
	☐ Yes.	. Give specific info	rmation about them Issuer name:			
21.		ment or pension ples: Interests in I		403(b), thrift savings accounts, or other	r pension or profit-sharing pla	ans
	☐ Yes.	List each accoun	t separately. Type of account:	Institution name:		
22.	Your		d deposits you have made s	so that you may continue service or use t, public utilities (electric, gas, water), tel		s, or others
				Institution name or individual:		
23.	Annui	ties (A contract fo	r a periodic payment of mor	ney to you, either for life or for a number	r of years)	
	_	lss	suer name and description.			
24.	26 U.S	ets in an education .C. §§ 530(b)(1), 5	on IRA, in an account in a 6529A(b), and 529(b)(1).	qualified ABLE program, or under a d	qualified state tuition progr	ram.
	■ No □ Yes.	Ins	stitution name and description	on. Separately file the records of any int	terests.11 U.S.C. § 521(c):	
25.	Trusts	s, equitable or fut	ure interests in property ((other than anything listed in line 1),	and rights or powers exerc	isable for your benefit
		Give specific info	ormation about them			
26.				and other intellectual property eds from royalties and licensing agreer	nents	
	☐ Yes.	Give specific info	ormation about them			
27.			and other general intangib mits, exclusive licenses, cod	oles operative association holdings, liquor lic	enses, professional licenses	
	☐ Yes.	Give specific info	ormation about them			
M	oney or	property owed to	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re ■ No	funds owed to y	ou			
	☐ Yes.	Give specific info	rmation about them, includi	ng whether you already filed the returns	and the tax years	
29.		y support pples: Past due or l	lump sum alimony, spousal	support, child support, maintenance, di	vorce settlement, property se	ettlement
	□ Yes	Give specific info	rmation			

Official Form 106A/B Schedule A/B: Property page 4

Case 20-10145-amc Doc 12 Filed 02/20/20 Entered 02/20/20 13:01:32 Page 5 of 21 Document Case number (if known) 20-10145 Tara L. Snyder Debtor 1 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ No Yes. Describe each claim....... Wrongful termination and workens compensation claim against previous employer due to injury. Debtor is being represented by Leisawitz Heller. \$0.00 Amount of recovery unknown, if any. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$210.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

Describe All Property You Own or Have an Interest in That You Did Not List Above

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

Official Form 106A/B Schedule A/B: Property page 5

No. Go to Part 7. ☐ Yes. Go to line 47.

Part 7:

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Debtor 1 Tara L. Snyder Case number (if known) 20-10145 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$130,000.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 57. \$2,200.00 Part 4: Total financial assets, line 36 58. \$210.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Copy personal property total 62. Total personal property. Add lines 56 through 61... \$2,410.00 \$2,410.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$132,410.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info	rmation to identify your	case:		
Debtor 1	Tara L. Snyder			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	F PENNSYLVANIA	
Case number	20-10145			
(if known)				Check if this is an amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2080 Garfield Drive Reading, PA 19609 Berks County	\$130,000.00		\$0.00	11 U.S.C. § 522(d)(1)
	Debtor purchased property in 2011 for \$130,000.00			100% of fair market value, up to any applicable statutory limit	
	Property value has decreased with the market. Current value is about the same as what debtor paid, possibly less due to the work it needs. Line from Schedule A/B: 1.1				
	household goods Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	Line nom <i>Schedule A/B</i> . 0.1			100% of fair market value, up to any applicable statutory limit	
	electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line IIIIII Schedule AVB. 7.1			100% of fair market value, up to any applicable statutory limit	
	clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	Line IIOIII Schedule AVD. 11.1			100% of fair market value, up to	

any applicable statutory limit

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Tara L. Snyder Case number (if known) 20-10145

De	eptor 1 lara L. Snyder			Case number (if known)	20-10145
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line Irom Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Checking account with Mid Penn Bank	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Savings account with Mid	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Wrongful termination and workens compensation claim against previous	\$0.00		\$0.00	11 U.S.C. § 522(d)(10)(C)
	employer due to injury. Debtor is being represented by Leisawitz Heller.			100% of fair market value, up to any applicable statutory limit	
	Amount of recovery unknown, if any. Line from <i>Schedule A/B</i> : 33.1				
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	ıt)
	■ No	yours and mailer to	1000 11	isa on or anor the date or adjustiner	,
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	.215 days before you filed this case?)
	□ No	a by the exemption wi		,= 10 days boloto you mod this oddo:	
	= -				

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		Document	Page 9	of 21		
Fill in this info	rmation to identify you	ır case:				
Debtor 1	Toro I. Covidor					
Deptor i	Tara L. Snyder First Name	Middle Name	Last Name		-	
Debtor 2	riotramo	Middle Name	Lactivanio			
(Spouse if, filing)	First Name	Middle Name	Last Name		-	
		EASTERN BIOTRICT OF BENI	10)/1.\/^^!!			
United States B	Sankruptcy Court for the:	EASTERN DISTRICT OF PEN	NSYLVANIA		-	
Case number	20-10145					
(if known)	20-10143				☐ Chec	k if this is an
					_	nded filing
						3
Official For	m 106D					
Schedule	D. Creditors	Who Have Claims	Secure	d by Propert	v	12/15
	D. Ordantors	Wile Have elaims		a by 1 Topoli	· J	12/10
		If two married people are filing togethe				
number (if known		out, number the entries, and attach it t	o this form. C	in the top of any addition	nai pages, write your n	ame and case
•	, rs have claims secured by	vour property?				
	-	his form to the court with your other	schodulos V	'ou have nothing also	to roport on this form	
_		·	scriedules. 1	ou have nothing else	to report on this form.	
■ Yes. Fill	in all of the information	below.				
Part 1: List	All Secured Claims					
2. List all secure	d claims. If a creditor has r	more than one secured claim, list the cred	ditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
much as possible	, list the claims in alphabeti	cal order according to the creditor's name	Э.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Pennsyl	vania Housing			0450 440 50	\$400.000.00	•
Finance		Describe the property that secures t	he claim:	\$156,113.56	\$130,000.00	\$26,113.56
Creditor's Na	me	2080 Garfield Drive Reading, 19609 Berks County	, PA			
		Debtor purchased property i	n 2011			
		for \$130,000.00				
		Duamanti, valua haa daaraa	ملك! لم			
		Property value has decrease the market.	ea with			
		Current value is about the s	ame as			
		what debtor paid, possibly le				
		to the work it				
211 Nort	th Front Street	As of the date you file, the claim is:	Check all that			
	ırg, PA 17101	apply. Contingent				
	eet, City, State & Zip Code	Unliquidated				
	, - y, <u></u>	☐ Disputed				
Who owes the	debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as n	nortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and I	Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
	f the debtors and another	☐ Judgment lien from a lawsuit				
_	claim relates to a	Other (including a right to offset)				
community						
Date debt was in	ocurred	Last 4 digits of account numb	nor.			
Date dept was III			~·			
Add the dollar	value of your entries in C	olumn A on this page. Write that numb	per here:	\$156,1	13.56	
		the dollar value totals from all pages.		\$156,1		
Write that num	ber here:) p150,1	13.30	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 10 of 21	
Fill in this info	ormation to identify your	case:		
Debtor 1	Toro I Spyder			
Debior 1	Tara L. Snyder First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF P	ENNSYLVANIA	
Case number	20-10145			
(if known)				☐ Check if this is an
				amended filing
Official Ea	rm 106E/F			
		// - 11 11	101-1	40/45
		ho Have Unsecure	ICITY ClaimS RITY claims and Part 2 for creditors with NONPRIO	12/15
any executory or Schedule G: Exe Schedule D: Cre left. Attach the C name and case r	ontracts or unexpired leases ecutory Contracts and Unexp ditors Who Have Claims Sec continuation Page to this par number (if known).	that could result in a claim. Als bired Leases (Official Form 106G ured by Property. If more space ge. If you have no information to	so list executory contracts on Schedule A/B: Proper c). Do not include any creditors with partially secure is needed, copy the Part you need, fill it out, numb report in a Part, do not file that Part. On the top of	orty (Official Form 106A/B) and on ed claims that are listed in our the entries in the boxes on the
	All of Your PRIORITY Ur			
	ditors have priority unsecure	d claims against you?		
No. Go to	o Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any cred	ditors have nonpriority unse	cured claims against you?		
☐ No. You	have nothing to report in this p	oart. Submit this form to the court w	vith your other schedules.	
Yes.				
■ Yes.				
unsecured of	claim, list the creditor separatel	y for each claim. For each claim lis	f the creditor who holds each claim. If a creditor has sted, identify what type of claim it is. Do not list claims a ou have more than three nonpriority unsecured claims	already included in Part 1. If more
				Total claim
4.1 Ally F	Financial	Last 4 digits of a	account number	\$6,486.00
	ority Creditor's Name			<u> </u>
200 R	lenaissance Ctr	When was the d	ebt incurred?	
	it, MI 48243			
	r Street City State Zip Code	As of the date ye	ou file, the claim is: Check all that apply	
_	curred the debt? Check one.			
■ Deb	otor 1 only	☐ Contingent		
☐ Deb	otor 2 only	☐ Unliquidated		
☐ Deb	otor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and an	other Type of NONPRI	IORITY unsecured claim:	
☐ Che	eck if this claim is for a com	munity		
debt		☐ Obligations ar	rising out of a separation agreement or divorce that you	u did not
Is the c	claim subject to offset?	report as priority	claims	
■ No		☐ Debts to pens	sion or profit-sharing plans, and other similar debts	
☐ Yes		■ Other. Specify	, repo	
				

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1 Tara I Snyder Case number (if known) 20-10145

Debt	or 1 lara L. Snyder	Case number (if known)	
4.2	Bank of Missouri Nonpriority Creditor's Name	Last 4 digits of account number	\$407.00
	PO BOX 89725 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.3	Capital One NA	Last 4 digits of account number	\$715.00
	Nonpriority Creditor's Name c/o Becket and Lee LLP PO BOX 3001	When was the debt incurred?	
	Malvern, PA 19355 Number Street City State Zip Code	As of the date year file, the plains in Observal, all the translation	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
1.4	Direct TV	Last 4 digits of account number	\$272.00
	Nonpriority Creditor's Name PO Box 5014	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	Пол	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify cable bill	
	03	- Other, Specify	

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Debtor	1 Tara L. Snyder	Case number (if known) 20-10145	
4.5	Keystone Orthopedic Specialists Nonpriority Creditor's Name	Last 4 digits of account number	\$614.00
	2201 Ridgewood Road STE 250 IL 61400	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.6	LVNV Funding	Last 4 digits of account number	\$746.00
	Nonpriority Creditor's Name PO Box 1269 Greenville, SC 29602	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.7	Patient First c/o Receivables		\$1,318.00
4.7	Management Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,310.00
	PO BOX 73810 Richmond, VA 23235	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical bill	

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Deptor 1	Tara L. Si	nyaer		Case n	umber (if known)	20-10145	
4.8 F	Portfolio Re	ecovery	Last 4 digits of account number				\$285.00
	Ionpriority Cred PO Box 410		When was the debt incurred?				
N	Norfolk, VA	23541					
		City State Zip Code	As of the date you file, the claim	is: Checl	k all that apply		
V	Vho incurred t	he debt? Check one.					
	Debtor 1 onl	у	☐ Contingent				
	Debtor 2 onl	V	☐ Unliquidated				
_	_	d Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
_	_	s claim is for a community	Student loans				
	iebt	s ciaini is ioi a community	☐ Obligations arising out of a sep	aration ac	reement or divorce	that you did not	
ls	s the claim su	bject to offset?	report as priority claims	a. a o a.s	,	tinat you are not	
	No		☐ Debts to pension or profit-shari	ng plans,	and other similar d	ebts	
[☐ Yes		Other. Specify credit card				
4.9 T	Mobile		Last 4 digits of account number				\$2,213.00
_	Ionpriority Cred	ditor's Name	_			_	Ψ=,= : 0:00
		a Fe Avenue	When was the debt incurred?				
		City, OK 73116 City State Zip Code	As of the date you file, the claim	is: Checl	k all that apply		
		he debt? Check one.	7.0 0o auto 70ao,o e.a		t all that apply		
	Debtor 1 onl	V	☐ Contingent				
	Debtor 2 onl	•	☐ Unliquidated				
_	_	•	<u> </u>				
_	_	d Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
_		of the debtors and another	Student loans	u Ciaiii.			
	」 Check if thi lebt	s claim is for a community	_				
		bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration ag	greement or divorce	that you did not	
	No		Debts to pension or profit-shari	ng plans,	and other similar d	ebts	
	∃ Yes		■ Other. Specify cell phone				
			Carlott Opcomy				
Part 3:	List Others	s to Be Notified About a Deb	That You Already Listed				
is trying have mo	to collect fro ore than one c for any debts	m you for a debt you owe to son		n Parts 1	or 2, then list the	collection agency h	ere. Similarly, if you
		Ţ.				01100 6450 4444	
	e amounts of unsecured cla		ns. This information is for statistical	reporting	purposes only. 2	6 U.S.C. 9159. Add t	ne amounts for each
					Total	l Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
То					-		
clair from Par		Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.		jury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	
					-		
	6e.	Total Priority. Add lines 6a throu	ugh 6d.	6e.	\$	0.00	
					Total	l Claim	
	6f.	Student loans		6f.	\$	0.00	
To							
clair from Par		Obligations arising out of a se	paration agreement or divorce that			2.22	
		you did not report as priority c	laims	6g.	\$	0.00	
	6h.		ring plans, and other similar debts	6h.	\$	0.00	
	6i.	outer. Add all other nonpriority to	nsecured claims. Write that amount	6i.	_	12 056 00	

Official Form 106 E/F

13,056.00

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Debtor 1 Tara L. Snyder Case number (if known) 20-10145

6j. Total Nonpriority. Add lines 6f through 6i.

sj. \$ 13,056.00

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Fill in this info	rmation to identify your	case:		
Debtor 1	Tara L. Snyder			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	EASTERN DISTRICT OF PENNSYLVANIA		
Case number	20-10145			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	<u> </u>		<u> </u>	2 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	- Ay		Ciato	211 0000	
-	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	nt Page 16 o	f 21	
Fill in this	information to identify your	case:			
Debtor 1	Tara L. Snyder				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
	3,				
United Sta	ites Bankruptcy Court for the:	EASTERN DISTRICT C	DE PENNSTLVANIA		
	ber 20-10145				
(if known)					Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
1. Do No Yes 2. With Arizor No. Yes 3. In Col	e and case number (if known) you have any codebtors? (If s hin the last 8 years, have you ha, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spo	Answer every question you are filing a joint case, I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live	do not list either spouse roperty state or territor lerto Rico, Texas, Washi e with you at the time?	as a codebtor. y? (Community properington, and Wisconsington)	op of any Additional Pages, write orty states and territories include ong with you. List the person shown the creditor on Schedule D (Official
Form out C	106Ď), Schedule E/F (Officia olumn 2.	Form 106E/F), or Sched	ule G (Official Form 10	6G). Use Schedule D	, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The concept Check all schedu	reditor to whom you owe the debt les that apply:
3.1				☐ Schedule D, li	20
3.1	Name			Schedule E/F,	
				☐ Schedule G, li	
-	Number Street City	State	ZIP Code	_	
				Полив	
3.2	Name			□ Schedule D, li □ Schedule E/F,	
				☐ Schedule G, li	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your ca	ase:					l				
	otor 1 Tara L. Snyo										
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PEN	ISYLVANIA							
Cas	se number 20-10145						Check if	this is:			
(If kr	nown)		-				☐ An a	mended	filing		
										ng postpetition of following date:	chapter
	fficial Form 106I						MM.	/ DD/ YY	ΥΥ		
S	chedule I: Your Inc	ome									12/1
atta	use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment Fill in your employment			es, write you			I case num	ber (if kr	nown).	Answer every	
	information.		_							filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed					■ Employed			
	information about additional employers.		☐ Not employed					☐ Not employed			
	employers.	Occupation	Occupation <u>Laborer- Part Time</u> Employer's name <u>Giant Food Stores</u>			Laborer					
	Include part-time, seasonal, or self-employed work.	Employer's name				Dor-m			nae Industries, Inc.		
	Occupation may include student or homemaker, if it applies.	Employer's address		larrisburg le, PA 1701				001 Rea eading,		Crest Avenue 9605	
		How long employed to	here?	Started	Noven	nber	2019	S	tarted	January 2020)
Pai	Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have	nothing to re	port for	any I	line, write \$0) in the s	pace. Ir	nclude your non	-filing
-	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the	information	for all e	emplo	oyers for tha	at person	on the	lines below. If y	ou need
							For Debto	r 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	41	16.00	\$	2,517.66	
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	0.00	

Official Form 106I Schedule I: Your Income page 1

416.00

2,517.66

Calculate gross Income. Add line 2 + line 3.

btor 1	Tara L. Snyder	_	Case no	umber (<i>if known</i>)	20-101	45
			For D	ebtor 1		ebtor 2 or ling spouse
Co	opy line 4 here	4.	\$	416.00	\$	2,517.66
1 :	st all payroll deductions:					
	• •	_	•		•	
5a	•	5a.	\$	61.23	\$	548.57
5b	·	5b.	\$	0.00	\$	0.00
5c 5d	,	5c. 5d.	\$	0.00	\$	0.00
5u 5e		5a. 5e.	\$ 	0.00	\$ 	0.00
5f.		5f.	\$—	0.00	\$	0.00
5g		5g.	\$ 	0.00	\$	0.00
5h	•	5h.+	- :		+ \$	0.00
		_	· —		-	
	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	61.23	\$	548.57
	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	354.77	\$	1,969.09
Li: 8a	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	82	¢	0.00	¢	0.00
8b	monthly net income. D. Interest and dividends	8a. 8b.	\$	0.00	\$	0.00 0.00
8c			\$ \$	605.00	\$	0.00
8d		8d.	\$	1,044.00	\$	0.00
8e	e. Social Security	8e.	\$	0.00	\$	0.00
8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00
8g	p. Pension or retirement income	8g.	\$	0.00	\$	0.00
8h	n. Other monthly income. Specify: 2018 Tax Refund Pro Rata	8h.+	\$	353.33	+ \$	0.00
	Social Security for son		\$	771.00	\$	0.00
	contribution from friend for rent		\$	500.00	\$	0.00
Ac	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,273.33	\$	0.00
. Ca	alculate monthly income. Add line 7 + line 9.	10. \$	3,	628.10 + \$	1,969	9.09 = \$ 5,597.1
Ac	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
Ind oth Do	tate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your her friends or relatives. In not include any amounts already included in lines 2-10 or amounts that are not pecify:	depen				nedule J. 11. +\$ 0. 0
W	dd the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certain polices					12. \$ 5,597.1
						Combined

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Debte	or 1	Tara L. Snyder		Case number (if known)	20-10145		
13.	Do y ■	ou expect an inc	rease or decrease within the year after you file this form?				
		Yes. Explain:	Debtor was injured at a prior job and avers she was That job ended in 7/2/19 and was at NSL Wyomissin disclosed on Schedules A/B.	as at NSL Wyomissing LLC and is the subject of current litigation as			
			Then debtor was denied unemployment but appeale 2019.	ed it and started to re	ceive benefit in November		

Therefore, the means test income for debtor from July through December did not have income for working from July through early November (exempt the Social Security and child support and rent.

Debtor's spouse was also out of work and had 3 jobs in 2019 and unemployment compensation. He just started a new job in January of 2020. His adjusted gross income for 2019 was 12,080 and a third of that was UC.

Official Form 106I Schedule I: Your Income page 3

Fill	in this information to identify your case:				
Deb	Tara L. Snyder		Che □	eck if this is: An amended filing	
	ouse, if filing)				wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS'	YLVANIA		MM / DD / YYYY	
	e number 20-10145				
	nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Congrete Usuach	acid of Do	htor 2	
•		ioi Separate nouseri	ioia oi Dei	biol 2.	
2.	Do you have dependents? No	Dan an danska nalaska		Dan and dankla	Dana damandant
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		17	□ No ■ Yes
		Son- disabled a social security	and on	22	□ No ■ Yes □ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				100
exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a suppliciable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	1,073.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.		150.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor	me equity loans	4d. 5.	·	0.00

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Deb	tor 1 Tara L. Snyder	Case number (if known)	20-10145
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	300.00
	6b. Water, sewer, garbage collection	6b. \$	200.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	425.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	950.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	200.00
		· —	
	Personal care products and services	· · ·	250.00
11.	Medical and dental expenses	11. \$	200.00
12.	Transportation. Include gas, maintenance, bus or train fare.	12. \$	475.00
12	Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	
			100.00
14.	3	14. \$	0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	150 f	0.00
		15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	175.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16. \$	0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify: Husband car payment	17c. \$	386.00
	17d. Other. Specify: Husband credit card	17d. \$	220.00
18.	Your payments of alimony, maintenance, and support that you did not report a	s	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		0.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
24		·	
۷١.	Other: Specify: pet food and expenses	21. +\$	80.00
	haircuts		85.00
22	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	5,269.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		5,253.00
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,269.00
23	Calculate your monthly net income.		
_0.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,597.19
	23b. Copy your monthly expenses from line 22c above.	23b\$	
	200. Oopy your monuny expenses nominate 226 above.		5,269.00
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your <i>monthly net income</i> .	23c. \$	328.19
	The result is your monuny net income.		
24	Do you expect an increase or decrease in your expenses within the year after y	ou file this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect you		ease or decrease because of a
	modification to the terms of your mortgage?		
	■ No.		
	Yes. Explain here:		
	Too. Explainment.		